

# Utah State Hospital

## Employee Bloodborne Pathogen Exposure

### Employee / Supervisor Packet



## **Employee Information**

1. You have had an occupational exposure to blood or other potentially infectious material and the area needs to be washed with warm soap and water at this time.
2. Inform your supervisor of the incident and, if after hours, the nursing shift supervisor (SSRN).
3. Complete the employee incident report and have the supervisor on the shift sign the report.
4. You should be seen ASAP by an outside provider either a private provider or urgent care provider and inform them that this is an occupational exposure.
5. Baseline lab tests need to be drawn on you now and at designated intervals. (attached form)
6. If the Hepatitis B, C and HIV status of the source is known that information is provided to the medical services provider in a confidential manner. Post exposure treatment is provided by the outside provider.
7. The cost of this care is paid for by the Utah Worker's Compensation Fund.
8. Post exposure counseling should occur and can be provided by either the outside medical provider or by the Employee Health Nurse at your request.

## **Supervisor Information**

1. One of your employees had some form of occupational exposure to blood or other potentially infectious material.
2. Have them wash the area well with warm soap and water or flush the wound if washing is not feasible (ie. body fluid splashed into employee eye).
3. Ascertain if the source of the exposure is known and then check that individual's E- Chart in the lab/x-ray section for status of blood borne diseases.
4. If the source is a known + HIV or unknown HIV status but life style is suspicious for high risk behaviors, have the employee seen immediately (within 2 hours) by a physician at UVRMC for post exposure treatment.
5. Call the UVRMC emergency room triage nurse and inform them that you are sending an employee that has had an exposure to a known + HIV or highly likely + HIV and they must be evaluated for PEP(post exposure prophylaxis) immediately.
6. If the source person is neg. for bloodborne diseases no further treatment is necessary.
7. If the source is + for Hep B or Hep C send the employee to UVRMC lab for baseline testing with the attached lab request form completed.
8. The incident should be recorded on an employee incident report form and sent to the area supervisor.
9. If after hours, contact the nursing shift supervisor (SSRN) and inform them of the incident. If the source is + HIV, tell the supervisor that the employee has been sent for immediate treatment.
10. Any medical follow up will be provided by an outside provider
11. On the employee lab request form complete all employee demographic information. Check the labs ordered as Hepatitis B surface Ab, Hepatitis B surface Ag, Hepatitis C Ab, and only if the employee agrees mark the HIV1-2Ab area. The employee needs to be told that the results come back to the Employee Health Nurse and they will be contacted about the results. The physician is Dr. Goettsche, and sign yourself as the transcription person.
12. If the employee is unsure about the HIV test mark the Hold blood for 90 days area and UVRMC will keep that blood for 90 days to see if the employee changes their mind about wanting an HIV test. If nothing is marked in that area the lab will not hold the blood.

## **Examples of Exposure Incidents**

The possibility of a body fluid from one person coming in contact with the body fluid of another person is an exposure incident.

An occupational exposure incident is any episode where the blood or other body fluids of a patient comes in contact with the non-intact skin, mucous membranes or parentally of the employee while performing his/her work duties.

### **Examples**

1. Needle sticks
2. Cuts to employee from equipment used by patients that could be contaminated with blood or other body fluids.(razors, scissors, sewing needles)
3. Saliva from a patient that comes in contact with mucous membrane of the employee.(spit from a pt. into the eye of another, open mouth, or an area of skin abrasion)
4. Bites
5. Scratches (only if body fluids were present)
6. Abrasions (only if body fluids were present)
7. Open skin wound on the staff that came in contact with body fluids of another person.

**Each episode must be evaluated on an individual basis.**

When you are evaluating an incident the following information must be reviewed.

1. Bloodborne disease status of the source.
2. Hepatitis B vaccination status of the employee.
3. The exact circumstance of the incident

If an incident is unclear as to whether or not it is to be considered as an exposure episode then a second opinion is to be obtained from one of the following staff.

1. Employee Health Nurse (ext. 44631)
2. Unit Nursing Director
3. Nursing Administration (44220 / 44258)
4. SSRN (44262 / 44253)
5. PEP Hotline - Post exposure Prophylaxis (1-888-448-4911)

# **Chapter: Laboratory Services (LA)**

## **Section 1: Laboratory Services**

### **Policy**

The Utah State Hospital provides pathology and laboratory services in accordance with the needs of the patients consistent with the nature of treatment programs through a contractual agreement with a Joint Commission accredited laboratory.

### **Procedure**

1. Utah State Hospital provides the medical staff with laboratory testing to assist them in diagnosis and treatment of patients.
2. Ordering of Laboratory Tests.
  - 2.1. A physician's or nurse practitioner's written order is required for the performance of lab tests.
  - 2.2. The unit clerk or designee enters the ordered lab tests into the patient's chart.
    - 2.2.1. The order is checked for accuracy.
  - 2.3. The unit clerk/designee prints out the list of lab work to be done each day and puts it in the lab tracking book.
  - 2.4. The unit clerk/designee notes the MD/NP's order.
  - 2.5. A unit RN verifies the accuracy of the work and co-notes the order.
  - 2.6. The ordered lab tests are faxed to the UVRMC laboratory by the SSRN.
3. A phlebotomist visits each unit to draw blood for ordered lab tests.
  - 1.1. The unit clerk/RN verifies that lab work was collected.
2. Return of lab tests is recorded in lab tracking book.
  - 2.1. A copy of results of testing is placed on medical board within 24 hours of completion of test.
  - 2.2. Lab tests are reviewed and initialed by the MD/NP and filed in the patient's working chart.

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*Implemented: 6-8-89*

*Revised: 11-29-90*

*Revised: 9-92*

*Revised: 1-95*

*Revised: 12-98*

*Revised: 1-02*

*Reviewed: 1-05*

*Revised: 5-09*

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